

UNITED STATES POSTAL SERVICE  
OFFICIAL BUSINESS

**SENDER INSTRUCTIONS**

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

393296



PENALTY FOR PRIVATE  
USE, \$300

RETURN  
TO



Print Sender's name, address, and ZIP Code in the space below.

U.S. EPA, Region II

26 Federal Plaza

New York, NY 10278

T. Anderson, Rm. 710

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Mr. William McGlocklin  
SKF Industries  
1100 First Avenue  
King of Prussia, PA 19406-1352

4. Article Number

LB150245106

Type of Service:

- ☐ Registered ☐ Insured  
☐ Certified ☐ COD  
☒ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

X *M. Burke*

6. Signature - Agent

X

7. Date of Delivery

7/30/90

8. Addressee's Address (ONLY if requested and fee paid)

# POST OFFICE TO ADDRESSEE

**EXPRESS MAIL**  
**NEXT DAY SERVICE**



LB150245106

<b>ORIGIN</b>	Date In: 7-27-90	Postage: \$15.25
Post Office ZIP Code: 10063	Time In: 1:30 P.M.	FEES Return Receipt \$ 9.00 C.O.D. \$
Initials of Receiving Clerk: JID	Weight: 5 lbs. 10 oz.	
<b>ACCEPTANCE</b> <input type="checkbox"/> Next Day Delivery or <input type="checkbox"/> Second Day Delivery <input checked="" type="checkbox"/> By 12 Noon or <input type="checkbox"/> By 3:00 P.M. <input type="checkbox"/> Express Mail Military Service <input type="checkbox"/> International Express Mail Country Code		Total Postage & Fees: \$24.25
Express Mail Corporate Account No.: EPA METER		RETURN RECEIPT REQUESTED Federal Agency Account No.:
<b>FROM:</b> Trevor Anderson Project Manager W.D. LWA 26 Federal Plaza, Rm 710 New York, NY 10073		

**Service Guarantee:** If this shipment is mailed at designated USPS Express Mail service facilities on or before the specified deposit time for overnight delivery to the addressee, it will be delivered to the addressee or agent before noon or 3:00 p.m. the next day. Upon application by the mailer, USPS will refund the postage for this shipment if it is not delivered before noon or 3:00 p.m. of the next day, unless delivery was attempted, but could not be made, or because this shipment was delayed by strike or work stoppage. Consult your local Express Mail directory for morning and afternoon delivery areas. See The Domestic Mail Manual, Chapter 2, for details. Signature of the addressee, addressee's agent, or delivery employee is required upon delivery. Express Mail International Service mailings are not covered by this service guarantee. See the International Mail Manual for details.

**Insurance Coverage:** (See section 295 of the Domestic Mail Manual for exclusions of coverage, such as negotiable items and consequential loss.)  
 (1) *Merchandise Insurance.* Merchandise is insured against loss, damage or rifling up to a maximum of \$500. Indemnity will not be paid for spoilage of perishable items.  
 (2) *Document Reconstruction Insurance.* Non-negotiable documents are insured against loss, damage or rifling up to \$50,000 per piece subject to a limit of \$500,000 per occurrence.  
 (3) The maximum indemnity payable for negotiable items, cash, currency, or bullion is \$15.  
**Claims:**  
 • Claims for delay, loss, damage or rifling must be made within 90 days.  
 • Claim forms may be obtained and filed at any post office.  
 • The Customer Receipt must be presented when a claim is filed.

**Waiver of Signature and Indemnity (Domestic Only)**

I wish delivery to be made without obtaining the signature of the addressee or the addressee's agent (if, in the judgement of the delivery employee, the article can be left in a secure location) and I authorize the delivery employee to sign that the shipment was delivered and understand that the signature of the delivery employee will constitute valid proof of delivery.

SIGNED: \_\_\_\_\_

## CUSTOMER RECEIPT

**TO:**

Telephone Number: \_\_\_\_\_

William Maclocklin  
 SA Industries  
 1160 Fleet Avenue  
 King of Prussia, PA 19406-1332

Label 11-B (July 1988)

**Thank You For Using Express Mail Service**